

DOCUMENTATION

Purpose: This category describes the documentation process for recording information in the electronic case file to support eligibility and benefit level decisions.

CLARIFYING INFORMATION

1. Documentation reflects:
 - a. Statements made by members of the assistance unit and others;
 - b. How those statements were verified;
 - c. Eligibility decisions made and actions taken on the case; and
 - d. Why the actions were taken.
2. Documentation provides:
 - a. An ongoing permanent history of actions and decisions taken;
 - b. A support of eligibility, ineligibility and benefit level determination;
 - c. Credibility for decisions when used as evidence in legal matters;
 - d. A trail for reviewers to determine the accuracy of the benefits issued.

WORKER RESPONSIBILITIES

1. Follow these principles when documenting:
 - a. Clear Use readily understood language. Avoid jargon and abbreviations not commonly used.
 - b. Concise Documentation is subject to public review. Stick to the facts relevant to determining eligibility or benefit level. Do not include your opinion. Write in a non-judgmental manner.

- c. Complete The documentation must support the eligibility decision and allow a reviewer to determine what was done and why.
 - d. Consistent Explain how conflicts or inconsistencies of information were resolved. Demonstrate the reasonableness of decisions. Ensure that what you document accurately describes what happened with the case.
2. Document verbal or written statements by including:
- a. The name of the person making the statement;
 - b. The relationship of the person to the client;
 - c. Date that the statement was made;
 - d. Substance of the statement;
 - e. Eligibility factor that the statement verifies.
3. Document all case activity including but not limited to:
- a. Applications, reviews and recertifications;
 - b. Changes reported and discovered;
 - c. Any contact with assistance unit members or collateral contacts;
 - d. How changes were verified; and
 - e. Effect of any change on benefits;
4. Manual E contains a complete glossary of abbreviations. Acronyms are listed at the front of this manual. Listed here are the more commonly used and understood abbreviations:

aka	also known as	ap	absent parent
app	application	a/r	applicant/recipient
bc	birth certificate	bp	base period

ELIGIBILITY A-Z**Documentation**

canc	cancelled	cc	collateral contact, child care
chg	change	coop	cooperation
cr	case record	cs	child support, client statement
csv	cash surrender value	cw	case worker
cy	calendar year	dbt	debit
deduc	deduction	del	delete
dep	dependent, deprivation	desc	describe
det	determine	disc	discovery, discount
div	divorce	dob	date of birth
ei	earned income	ep	employability plan
er	eligibility review	es	employer statement
est	estimate	exp	expedited
fed	federal	ff	face to face
fh	fair hearing	fmv	fair market value
gdn	guardian	hh	household
hoh	head of household	hv	home visit
inc	income, incapacitated	incl	included
ind	individual, indicated	inf	information
inq	inquiry	int	interview, intention, interest
max	maximum	min	minimum
misc	miscellaneous	mr	monthly report(mmr,msr)
mo	monthly	na	not available/applicable, non-assistance
narr	narrative	nr	non-excluded resource
op	overpayment	ov	office visit
pa	public assistance	pc	program change
pd	paid, police dept.	pers	personal
pg	pregnant	pp	protective payee, purchase & prepare
ppt	pregnant, parenting teen	prog	program
prop	property	pt	part-time
qp	qualifying parent	qtr	quarter
rec	received, record	red	redetermine, redirect, reduce
reg	register, regular	ref	referral, reference, refugee,refund
rep	representative,replace	rel	related, release

ELIGIBILITY A-Z**Documentation**

req	requested	res	resources
resch	rescheduled	ret	retroactive, returned
sanc	sanction	s/mo	stepmother
s/fa	stepfather	sch	school
sd	spenddown	sep	separate
sf	seasonal farmworker	ss	social services, supplied shelter
std	standard	stmt	statement
sup	supervisor	supp	supplement
svc	service	sys	system
tc	telephone call	term	terminate
tp	treatment plan	tpl	third party liability
tr	transfer	trans	transfer, translated, transitional benefits
ub	unborn	ui	underissuance, unearned income
unk	unknown	unl	unlicensed
up	underpayment	upd	unpaid
util	utility	veh	vehicle
ver	verification, verified	vet	veteran
wk	week	wt	warrant
xfer	transfer	xmit	transmit
yr	year	ytd	year-to-date

ACES PROCEDURES

ACES provides ample space for documentation on the data collection fields, the Narrative (NARR) screen, and the Remarks (REMA) screens. The combination of these screens provides great detail and is acceptable evidence for Fair Hearings and criminal prosecutions.

The (NARR) screen is used for general information, the (REMA) screens for details.

Narrative Screen (NARR)

1. The (NARR) screen documents:
 - a. A summary of household information including:

- (1) Assistance unit(s) composition;
 - (2) Ineligible members;
 - (3) Disqualified members;
 - (4) Sanctioned members; and
 - (5) Non-household members sharing the residence and costs.
 - b. The ongoing case history:
 - (1) Approvals, denials, terminations;
 - (2) Reasons for actions taken;
 - (3) Cross-reference of remarks made under (REMA) screens;
 - (4) Letters and forms sent to the household; and
 - (5) Due dates for requested information;
 - (6) Alerts generated and dispositioned;
 - (7) Alternative processing methods (workarounds) used; and
 - (8) Overissuances, underissuances.
2. Access the (NARR) screen from:
- a. (SCDI) in screening;
 - b. Type [Y] in the Review/Update Narrative for HOH before printing the RFB.
 - c. Any screen in Inquiry or Update;
 - (1) Press <Home> key;
 - (2) Type (NARR) to access the Narrative screen;

- (3) When in Inquiry, press <F 19> to add text.
- 3. ACES enters the date and user ID of anyone accessing the (NARR) screen. To view the narrative without having the date and user ID entered, <F3> out to cancel.
- 4. Save documentation with <TRANSMIT>. The documentation is now a permanent part of the record and cannot be changed. Do not <F3> out of the (NARR) screen if documentation has been entered.

Remarks Screen (REMA)

- 1. Documentation made on (REMA) screens is specific to the entries made on the ACES information screen.
 - a. Information affecting eligibility or benefit level are detailed here;
 - b. The (REMA) screen answers who, what, where, why and how questions.
- 2. Access the (REMA) screen from any information screen by pressing <F9>.
 - a. ACES enters the date and user ID.
 - b. When transmitted and saved, ACES adds [Remarks] at the upper right of the information screen to show that remarks have been entered.
- 3. Required documentation on (REMA) screens:
 - a. When valid value [OT] (other), [CC] (collateral contact), or any valid value that is not self-explanatory is used as verification, document what the source is, how it verified the item, why it was accepted, etc;
 - b. (ADDR) Screen
 - (1) The change date for all address changes;
 - (2) That address inquiry has been done for match of other recipients living at the same address;

- (3) Reason for using mailing address rather than actual residential address;
 - (4) Supplemental Accommodation (NSA), document what arrangements have been made;
 - (5) Limited English Proficiency (LEP), document what language if valid value [OT] used and when and why an LEP client requests all correspondence in English;
 - (6) HCS documents here when a client receives Medicaid personal care.
- c. (AREP) Screen
- (1) Add in additional telephone numbers and clarifying information on AREP relationship to client;
 - (2) The reason a protective payee is in place and for how long.
- d. (STAT) Screen
- (1) Details about sanctions;
 - (2) Eligibility information regarding special programs;
 - (3) Reasons for using a 500 level reason code;
 - (4) List names and relationship of persons living with the assistance unit (AU) but not members of the AU.
 - (5) How a relative of specified degree was established and verified.
- e. (RES1), (RES2), (RES3), (TRAN) Screens
- (1) If no bank account, how does the client pay bills, cash checks, etc.
 - (2) Joint bank accounts with a non-AU member;
 - (3) If no vehicle, how does the client get around;
 - (4) A car that the client has use of but does not own;

- (5) Explain values set on vehicles other than determined by the NADA;
 - (6) Details about resources which are temporarily unavailable or inaccessible and a date set for followup;
 - (7) Why value of property is excluded;
 - (8) How separate property was verified;
 - (9) How a transferred resource affects eligibility.
- f. (ERN1) and (ERN2) Screens gather many details regarding earned income. Each field should be completed accurately, but not all details can be captured there. Remarks are necessary as follows:
- (1) A general work history on each adult in the assistance units;
 - (2) If not employed, when the client last worked and the name of the employer;
 - (3) An accounting of draws or tips or other special circumstances;
 - (4) Pay period ending dates and dates paid for the month being recorded;
 - (5) Year to date totals, so that they are saved for a comparison each month;
 - (6) Extra pay or bonuses received or expected;
 - (7) Earned Income Credit (EIC) received;
 - (8) Separate data when the client has more than one job;
 - (9) Method used for estimated earnings for beginning months or prospective budgeting.
- g. (UINC) Screen
- (1) Why prospective or retrospective budgeting method is used;

- (2) Why deductions are allowed;
 - (3) Pay periods;
 - (4) Begin and end dates;
 - (5) Status on child support for each child;
 - (6) Document discussion about potential benefits.
- h. (SHEL) screen:
 - (1) List other persons living in the residence;
 - (2) List ineligible members of the assistance unit;
 - (3) Explain how expenses are paid and shared/proration of SUA/LUA;
 - (4) State purchase and prepare agreement;
 - (5) Give other (SHEL) screen ID when expenses are listed on a (SHEL) screen for other than the head of the assistance unit.
- i. (CARE) Screen:
 - (1) WorkFirst Job Search Workshop start and end date;
 - (2) Co-payment amount for child care.
- j. (FSFI) and (CAFI) Screens:
 - (1) Overpayment/Underpayment information, why a BEG is ignored;
 - (2) Budgeting method if different than indicated on screen;
 - (3) Breakdown for each month when adding a person to a cash program;
 - (4) Pointer to (FSME) screen for update on medical expenses.

- k. (WORK) Screen
 - (1) Details on sanctions;
 - (2) ABAWDS status for food assistance;
 - (3) Schedule for orientation, work shops, job search, etc.